

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			1-10-74
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral) ... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
Final	Original
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2	31-02
3	31-03
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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